#### GOVERNMENT OF THE DISTRICT OF COLUMBIA

# OFFICE OF CAMPAIGN FINANCE WASHINGTON, D.C. 20009

#### REPORT OF RECEIPTS AND EXPENDITURES FOR

#### INITIATIVE

#### SUMMARY PAGE

Full Name of Committee (Name of Candidate, if Candidate is reported.  No On 71  On 71	e is reporting)  2. OCF Identification Number  INTOOO140007			
Address (Number and Street) 4110 5th Street, NW		3. Is this report an Amendment? (Yes or No) No		
City, State and Zip Code  Washington DC 20011				
4. TYPE OF REPORT: Fourth Report This REPORT contains activity for: General	ı			
SUMMARY  5. Covering Period 09/23/2014 through 10/24/2014		COLUMN A THIS PERIOD	COLUMN B	
6. (a) Cash on Hand (January 31st Year End Report Only)			\$0.00	
(b) Cash on Hand at Beginning of Reporting Period		\$0.00		
(c) Total Receipts [from Line (16)]		\$3,838.00	\$3,838.00	
(d) Subtotal [add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column (B)]		\$3,838.00		
7. Total Expenditures (from Line 22)		\$3,482.15	\$3,482.15	
Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]		\$355.85		
Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)		\$0.00	\$0.00	
10. (a) Loans Owed BY the Committee or the Candidate (itemize all on Schedule E)		\$0.00	\$0.00	
(b) Loans Owed TO the Committee or the Candidate (itemize all on Schedule E-1)		\$0.00	\$0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		For furth	er information, contact:	
Terence O'Connor  Type or Print Name of Treasurer (Name of Candidate, if Candidate is reporting)  ELECTRONICALLY CERTIFIED			Campaign Finance Reeves Municipal Building	
			on, D.C. 20009	
		10/27/2014 (202) 671	-0547	
Signature of Treasurer (Name of Candidate, if Candidate is reporting)		Date		
NOTE: Submission of late, false, erroneous, or incomplete informat Official Code §§1-1103.05 and 1-1107.01 (2001 Edition).	ion may subject the person signing	this report to the penalties of D.C.		
All previous versions of OCF FORM 16 should no longer be used.			OCF FORM 16 Rev. 09/2005	

# DETAILED SUMMARY PAGE OF RECEIPTS AND EXPENDITURES

OCF Form 16, Page 2

OCF FORM 10, Fage	4		
Full Name of Committee (Name of Candidate, if Candidate is reporting)     No On 71	REPORT COVERING THE PERI FROM: 9/23/14	TOD TO: 10/24/14	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DAT	E
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:	\$3,838.00	\$3,838.00	11( )
(a) Individuals/Organizations Other Than Political Committees (Schedule A)		-	11(a)
(b) Political Party Committees (Schedule A-1)	\$0.00	\$0.00	11(b)
(c) Pol. Comms. Other than Pol. Comms. Authorized by the same Can. (Sch A-2)	\$0.00	\$0.00	11(c)
(d) The Candidate (Schedule A-3)	\$0.00	\$0.00	11(d)
(e)Transfers From Authorized Comms. of the Can. identified in this Report (Sch A-4)	\$0.00	\$0.00	11(e)
(f) <b>Total Contributions</b> - Other Than Loans [add lines 11(a), (b), (c), (d), and (e)]	\$3,838.00	\$3,838.00	11(f)
12. SALES AND COLLECTIONS (Schedule C)	\$0.00	\$0.00	12
13. LOANS			
(a) Loans owed BY The Candidate/PCC or the Committee (Schedule E)	\$0.00	\$0.00	13(a)
(b) Loans owed TO The Candidate/PCC or the Committee(Schedule E-1)	\$0.00	\$0.00	13(b)
(c) Total Loans [add Lines 13(a), and 13(b)]	\$0.00	\$0.00	13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$0.00	\$0.00	14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$0.00	\$0.00	15
16. TOTAL RECEIPTS [add Lines 11(f), 12, 13(c), and 14 and 15]	\$3,838.00	\$3,838.00	16
II. EXPENDITURES			
17. OPERATING EXPENDITURES (Schedule B)	\$3,482.15	\$3,482.15	17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$0.00	\$0.00	18
19. LOAN REPAYMENTS: (a) OF Loans awad DV. The Condidate/DCC on the Committee (Cabadula E)			
(a) Of Loans owed BY The Candidate/PCC or the Committee (Schedule E)	\$0.00	\$0.00	19(a)
(b) Of Loans owed TO The Candidate/PCC or the Committee (Schedule E-1)	\$0.00	\$0.00	19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$0.00	\$0.00	19(c)
20. REFUNDS OF CONTRIBUTIONS TO:	\$0.00	\$0.00	20(-)
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$0.00	\$0.00	20(a)
(b) Political Party Committees (Schedule B-3)		•	20(b)
(c) Other Political Committees (Schedule B-4)	\$0.00	\$0.00	20(c)
(d) <b>Total Contribution Refunds</b> [add Lines 20(a), (b), and (c)]	\$0.00	\$0.00	20(d)
21. OTHER EXPENDITURES	\$0.00	\$0.00	21(a)
(a) Independent Expenditures (Schedule B-5)	\$0.00	\$0.00	21(b)
(b) Offsets to Receipts (Schedule B-6) (c) Total Other Expenditrures [add Lines 21(a), and 21(b)]	\$0.00	\$0.00	21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$3,482.15	\$3,482.15	22
III. CASH SUMMARY			
A2 CACH ON HAND AT RECIBINING OF DEDCRITING REPROP		\$0.00	
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		\$0.00	_
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$3,838.00	_
		\$3,838.00 \$3,838.00	_ _ _
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		\$3,838.00	

Any information copied from such Reports or State contributions, or for commercial purposes.	ements may not be sold or used by any person for the	purpose of soliciting	
Full Name of Committee (Name of Candidate, if Can No On 71	didate is reporting)		
1. Full Name, Mailing Address and Zip Code Kathleen Lippitt 1996 Continental Lane Escondido CA 92029	Name and Address of Employer	Date Amount of Each Contribution Thi Period	
Contributor Type Individual	Occupation	10/14/2014	\$10.00
Receipt For PAC	Contribution Type Credit Card	Aggregate Year-To-date \$10.00	
2. Full Name, Mailing Address and Zip Code Stephanie Dailey 3017 Hawthorne Dr. N.E. Washington DC 20017	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type Individual	Occupation	09/30/2014	\$50.00
Receipt For PAC	Contribution Type Credit Card	Aggregate Year-To-date \$50.00	
3. Full Name, Mailing Address and Zip Code Raymond Young 50 Burdette Rd, NW Atlanta GA 30327	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type Individual	Occupation	10/08/2014	\$100.00
Receipt For PAC	Contribution Type Credit Card	Aggregate Year-To-date \$100.00	
4. Full Name, Mailing Address and Zip Code Michael Webb 724 Marin Drive Mill Valley CA 94941 Contributor Type Individual	Name and Address of Employer  Mental Health Substance Abuse Svcs 724 Marin Drive Mill Valley CA 94941  Occupation  Self-Employee Assistance Professional	Date 10/13/2014	Amount of Each Contribution This Period \$100.00
Receipt For PAC	Contribution Type Credit Card	Aggregate Year-To-date \$100.00	
5. Full Name, Mailing Address and Zip Code Tommy Valentine 6487 Warwick Circle Alexandria VA 22315	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type Individual	Occupation	10/15/2014	\$3.00
Receipt For PAC	Contribution Type Credit Card	Aggregate Yea	r-To-date

Full Name of Committee (Name of Candidate, if Candidate, i	didate is reporting)		
No On 71	. 5		
6. Full Name, Mailing Address and Zip Code  Krishna Upadhya  2601 Woodley Place, NW, Apt. 1103  Washington DC 20008	Name and Address of Employer John Hopkins University 200 N. Wolfe Street Baltimore MD 21287	Date Amount of Eacl Contribution The Period	
Contributor Type	Occupation	10/06/2014	\$100.00
Individual	Physician		
Receipt For	Contribution Type	Aggregate Year-To-date	
PAC	Credit Card	\$100.00	
7. Full Name, Mailing Address and Zip Code  Michael Thompson 30 O'Connor Circle  West Orange NJ 07052	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type	Occupation	10/14/2014	\$100.00
Individual			
Receipt For	Contribution Type	Aggregate Year-To-date \$100.00	
PAC	Credit Card		
8. Full Name, Mailing Address and Zip Code Jonathan Talcott 5001 Rockwood Parkway, NW Washington DC 20016	Name and Address of Employer	Date Amount of Ea Contribution T Period	
Contributor Type Individual	Occupation	10/09/2014	\$2,000.00
Receipt For	Contribution Type	Aggregate Yea	r-To-date
PAC	Credit Card	\$2,000.00	
9. Full Name, Mailing Address and Zip Code  Ted Strader  845 Barret Avenue  Louisville KY 40204	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type	Occupation	10/14/2014	\$100.00
Individual			
Receipt For	Contribution Type	Aggregate Yea	r-To-date
PAC	Credit Card	\$100.00	
10. Full Name, Mailing Address and Zip Code Krista Stark 1715 Braddock Pl, #302 Alexandria VA 22302	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type	Occupation	10/17/2014	\$250.00
Individual			
Receipt For	Contribution Type	Aggregate Yea	r-To-date
PAC	Credit Card	\$250.00	

contributions, or for commercial purposes.					
Full Name of Committee (Name of Candidate, if Cano No On 71	didate is reporting)				
11. Full Name, Mailing Address and Zip Code Joan Speer 926 Pine Valley Road Banning CA 92220	Name and Address of Employer	Date Amount of Eacl Contribution The Period			
Contributor Type	Occupation	10/14/2014	\$25.00		
Individual					
Receipt For	Contribution Type	Aggregate Yea	Aggregate Year-To-date		
PAC	Credit Card	\$25.00			
12. Full Name, Mailing Address and Zip Code Sue Rusche 1436 Cornell Road, N.E, Atlanta GA 30306 Contributor Type	Name and Address of Employer National Families in Action PO Box 133136 Atlanta GA 30333 Occupation	Date 10/13/2014	Amount of Each Contribution This Period		
Individual	President & CEO				
Receipt For	Contribution Type	Aggregate Year-To-date			
PAC	Credit Card	\$100.00			
13. Full Name, Mailing Address and Zip Code Sheila Polk 65 Yakashba Drive Prescott AZ 86305	Name and Address of Employer Yavapai County 255 E. Gurlev Prescott AZ 86301	Date	Amount of Each Contribution This Period		
Contributor Type	Occupation	10/13/2014	\$75.00		
Individual	Attorney				
Receipt For PAC	Contribution Type Credit Card	Aggregate Year-To-date \$75.00			
14. Full Name, Mailing Address and Zip Code Christine Miller 6508 Beverly Road Idlewylde MD 21239 Contributor Type Individual	Name and Address of Employer MillerBio 6508 Beverly Road Baltimore MD 21239 Occupation Molecular Neuroscientist	Date 10/11/2014	Amount of Each Contribution This Period \$150.00		
Receipt For	Contribution Type	Aggregate Yea	r_To_date		
PAC	Credit Card	\$150.00	1 10-uaic		
15. Full Name, Mailing Address and Zip Code Carla Jenkins 1711 Massachusetts Ave NW, Apt 231 Washington DC 20036	Name and Address of Employer Federal Government 409 Third Street, SW Washington DC 20416	Date 09/30/2014	Amount of Each Contribution This Period		
Contributor Type Individual	Occupation Program Analyst				
		A garageta V	r To data		
Receipt For	Contribution Type	Aggregate Yea	1-10-date		
PAC	Credit Card	\$25.00			

6. Full Name, Mailing Address and Zip Code  Jason Grellner	Name and Address of Employer	Date	Amount of Each Contribution This
111 Cedarwood Lane Pacific MO 63069			Period
Contributor Type	Occupation	10/14/2014	\$50.00
Individual			
Receipt For	Contribution Type	Aggregate Year-To-date	
PAC	Credit Card	\$50.00	
7. Full Name, Mailing Address and Zip Code	Name and Address of Employer	Date	Amount of Each
Paula Gordon 6101 16th St. NW #906			Contribution This Period
Washington DC 20011  Contributor Type	Occupation	10/13/2014	\$100.00
Individual  Passint For	Contribution Type	A compacts 37	r To data
Receipt For PAC	Contribution Type Credit Card	Aggregate Year-To-date \$100.00	
8. Full Name, Mailing Address and Zip Code Ronald Demery 4724 Captain Bavne Ct Marlboro MD 20772	Name and Address of Employer	Date	Amount of Each Contribution This Period
Contributor Type	Occupation	10/13/2014	\$100.00
Individual			
Receipt For	Contribution Type	Aggregate Yea	r-To-date
PAC	Credit Card	\$100.00	
9. Full Name, Mailing Address and Zip Code Peter Fitzgerald 1447 G-1 Dolley Madison Blvd McLean VA 22101	Name and Address of Employer Fitzgerald Properties 1447 G-1 Dolley Madison Blvd McLean VA 22101	Date	Amount of Each Contribution This Period
Contributor Type	Occupation	10/09/2014	\$200.00
Individual	Real Estate		
Receipt For	Contribution Type	Aggregate Yea	r-To-date
PAC	СН	\$200.00	
O. Full Name, Mailing Address and Zip Code  Julie Schauer  9356 Sibelius Drive	Name and Address of Employer	Date	Amount of Each Contribution This Period
Vienna VA 22182	Occupation	09/29/2014	\$200.00
Contributor Type	Оссираціон		
Individual	Contribution Trans	Aggregate Yea	r-To-date
Individual Receipt For	Contribution Type	Aggregate Year-To-date \$200.00	

# OCF FORM 16 SCHEDULE B Page 1 of 1 for Line Number 17

### ITEMIZED OPERATING EXPENDITURES

Any information copied from such Reports or Statements or for commercial purposes.	may not be sold or used by any person for t	he purpose of solic	iting contributions,
Full Name of Committee (Name of Candidate, if Candidate is <b>No On 71</b>	reporting)		
Full Name, Mailing Address and Zip Code  Paypal	Name and Address of Employer	Date	Amount of Each Expenditure This Period
2211 North First Street San Jose CA 95131		10/20/2014	\$105.12
Purpose of Expenditure  Bank Fees	Occupation		
Expenditure For: PAC	Expenditure Description (if necessary)		
2. Full Name, Mailing Address and Zip Code  CBS Outdoor	Name and Address of Employer	Date	Amount of Each Expenditure This Period
405 Lexington Avenue New York NY 10174		10/23/2014	\$3,377.03
Purpose of Expenditure Advertising	Occupation		
Expenditure For: PAC	Expenditure Description (if necessary)		
TOTAL This Period (Aggregate of all expenditure pages)			\$3,482.15

# SCHEDULE C ITEMIZED RECEIPTS - SALES AND COLLECTIONS

OCF FORM 16 Page 1 of 1 for Line Number 12

Full Name of Committee (N No On 71	ame of Candidate, if Candidate is reporting)		
TOTAL SUM OF PROCE	EDS DURING THE REPORTING PERIOD FROM:	09/23/2014	TO 10/24/2014
Sale of Tickets (list by even	ent below)*		\$
2. Mass Collections (list by			\$
3. Sale of Items	,		\$
	tions of \$49.00 or less from individuals		\$ ———
			\$
` ,	, C,		
	A SET OF SAARS AND SOAR	ECTIONS BY EVENT	
	LIST OF SALES AND COLL	ECTIONS BY EVENT	T
Date of Event (Month, Day, Year)	Type of Event	Amount From Sale of Tickets This Period	Amount From Mass Collections This Period
TOTAL THIS PERIOD (Aggregate the subtotal o	f all Sales and Collections Page		

<sup>\*</sup> After completion of the above list by event, use the appropriate sub-schedule of Schedule A to list the date, full name and mailing address (occupation and principal place of business, if any) of each person who has purchased one or more tickets for events such as dinners, luncheons, rallies, and similar fund-raising events during this reporting period, and whose ticket purchases are in excess of \$49, or whose total ticket purchases to date for the calendar year (aggregate) are in excess of \$49. Attach the appropriate sub-schedule A to this Schedule, and identify it as Part 2 of Schedule C.

#### SCHEDULE D

#### DEBTS AND OBLIGATIONS

**Excluding Loans** 

OCF FORM 16 Page 1 of 1

Full Name of Committee (Name of Candidate, if Candidate is reporting)	Outstanding Balance Beginning This	Amount Incurred This Period	Payment This	Outstanding Balance at Close of This
No On 71	Period			Period
Full Name, Mailing Address and Zip Code     of Debtor or Creditor				
Nature of Debt (Purpose)				
TOTAL This Period (Aggregate the subtotal of all Debts at carry	nd Obligations Schedules and			

forward to line 9 of the Summary Page)

#### SCHEDULE E

### LOANS OWED BY THE COMMITTEE OR THE CANDIDATE

FORM 16 Page 1 of 1 for Line Number 19b

Full Name of Committee (Name of Candidate, if Cand	idate is reporting)				
No On 71	idate is reporting)				
A. Full Name, Mailing Address and Zip Code of Loan Source  Election:		Original Amount of Loan	Payment this Period	Cumulative Payment to Date	Balance Outstanding at Close of This Period
Terms: Date Incurred	Date Due:		Interest Rate:	% (apr)	Secured
List All Endorsers or Guarantors (if any)					
Full Name, Mailing Address and Zip Code	Name of Emplo	oyer			
	Occupation				
	Cuarantand An				
	Guaranteed Amount Outstanding				
	•				
SUBTOTAL this period this page					
TOTALS this period (Aggregate the Subtotals from all Loan Schedules)					
Carry outstanding Loan Balance forward to Line 10(a) on Summary Page.					